



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1079674

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
---	---

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
-----------------------------------	-----------	---------	-------------	---------------	---------

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
---	---	--

Form	ACO1 - Well Completion
Operator	Edison Operating Company LLC
Well Name	Cottrell 2-9
Doc ID	1079674

All Electric Logs Run

Dual Induction
Compensated density neutron
sonic
micro

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

September 17, 2012

David Withrow
Edison Operating Company LLC
9427 E. Cross Creek
WICHITA, KS 67206

Re: ACO1
API 15-119-21316-00-00
Cottrell 2-9
SW/4 Sec.09-33S-29W
Meade County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
David Withrow



PO Box 93999
Southlake, TX 76092

Voice: (817) 546-7282
Fax: (817) 246-3361

INVOICE

Invoice Number: 131202

Invoice Date: May 16, 2012

Page: 1



Bill To:
Edison Operating 1223 N. Rock Rd. Wichita, KS 672206

Customer ID	Well Name# or Customer P.O.	Payment Terms	
EdOp	Cottrel #2-9	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Liberal	May 16, 2012	6/15/12

Quantity	Item	Description	Unit Price	Amount
150.00	MAT	Material Sales	16.25	2,437.50
22.00	MAT	Chloride	58.20	1,280.40
500.00	MAT	ALC	15.00	7,500.00
125.00	MAT	FloSeal	2.70	337.50
732.00	SER	Cubic Feet	2.10	1,537.20
775.00	SER	Ton Miles	2.35	1,821.25
1.00	SER	Surface	1,925.00	1,925.00
25.00	SER	Heavy Vehicle Mileage	7.00	175.00
25.00	SER	Light Vehicle Mileage	4.00	100.00
1.00	EQP	8 5/8 Baffle Plate	112.00	112.00
1.00	EQP	8 5/8 Guide Shoe	394.00	394.00
2.00	EQP	8 5/8 Basket	478.00	956.00
4.00	EQP	8 5/8 Centralizers	64.00	256.00
1.00	CEMENTER	Ruben Chavez		
1.00	CEMENTER	David Mathis		
1.00	CEMENTER	Darin Franklin		
1.00	EQUIP OPER	Lenny Baeza		
1.00	OPER ASSIST	Daniel Pimentel		

*9732
cement 8 5/8" spec*

ALL PRICES ARE NET, PAYABLE
30 DAYS FOLLOWING DATE OF
INVOICE. 1 1/2% CHARGED
THEREAFTER. IF ACCOUNT IS
CURRENT, TAKE DISCOUNT OF

\$ **3766.37**

ONLY IF PAID ON OR BEFORE
Jun 10, 2012

Subtotal	18,831.85
Sales Tax	968.96
Total Invoice Amount	19,800.81
Payment/Credit Applied	
TOTAL	19,800.81

ALLIED OIL & GAS SERVICES, LLC 053415

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Liberal KS

DATE <u>05-16-12</u>	SEC. <u>9</u>	TWP. <u>33S</u>	RANGE <u>29W</u>	CALLED OUT	ON LOCATION	JOB START <u>11:00</u>	JOB FINISH <u>12:30</u>
LEASE <u>Cottrell</u>	WELL # <u>2-9</u>		LOCATION <u>S.W. Plains KS.</u>			COUNTY <u>Meade</u>	STATE <u>KS.</u>
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Duke rig 6
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 T.D. 1555 feet
 CASING SIZE 8 5/8 24# DEPTH 1554.2
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT 40.90
 CEMENT LEFT IN CSG. 40.90 f
 PERFS.
 DISPLACEMENT 96.4
 EQUIPMENT

OWNER
 CEMENT
 AMOUNT ORDERED 500 SK 65/35/16.0 g/l
3/CC 1/4# Flo
150 SK Class A 2/CC
 COMMON 150 SK "A" @ 16.25 2437.50
 POZMIX @
 GEL @
 CHLORIDE 2.2 @ 58.20 128.04
 ASC @
ALL 2A 500 SK @ 15.00 7500.00
Flo-Seal 125 # @ 2.70 337.50
 HANDLING 732 @ 2.10 1537.20
 MILEAGE 775 @ 2.35 1821.25
 TOTAL 14913.85

PUMP TRUCK CEMENTER R. Chavez / D. Mathis
 # 549/550 HELPER Darrin Franklin
 BULK TRUCK
 # DRIVER Lenny Bueza
 BULK TRUCK
 # DRIVER Daniel Pimentel

REMARKS:

SERVICE

DEPTH OF JOB 1555 feet
 PUMP TRUCK CHARGE 1925.00
 EXTRA FOOTAGE @
 MILEAGE Heavy 25 @ 7.00 175.00
 MANIFOLD @
Big Veh. 25 @ 4.00 100.00
 @

TOTAL 2200.00

CHARGE TO: Edison Energy
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

Baffle Plate 1 @ 112.00 112.00
Guide Shoe @ 394.00 394.00
Con. basket 2 @ 478.00 956.00
Controlizer 4 @ 64 256
 @

TOTAL 1718.00

To: Allied Oil & Gas Services, LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Bob Kasper

SIGNATURE Bob Kasper

SALES TAX (If Any) _____
 TOTAL CHARGES 19142.85
 DISCOUNT _____ IF PAID IN 30 DAYS

TOTAL - 12,442.85



PAGE 1 of 1	CUST NO 1007020	INVOICE DATE 05/25/2012
INVOICE NUMBER 1718 - 90914375		

Pratt (620) 672-1201
 B EDISON OPERATING COMPANY LLC
 I 1223 NORTH ROCK ROAD BLDG I-100
 L WICHITA
 L KS US 67206
 T
 O ATTN: DAVID WITHROW

J LEASE NAME Cottrell 2-9
 O LOCATION
 B COUNTY Meade
 S STATE KS
 I JOB DESCRIPTION Cement-New Well Casing/Pi
 T
 E JOB CONTACT

JOB #	EQUIPMENT #	PURCHASE ORDER NO.	TERMS	DUE DATE
40467803	27463		Net - 30 days	06/24/2012

	QTY	U of M	UNIT PRICE	INVOICE AMOUNT
<i>For Service Dates: 05/23/2012 to 05/23/2012</i>				
0040467803				
171806231A Cement-New Well Casing/Pi 05/23/2012				
Cement 5 1/2" Longstring				
AA2 Cement	135.00	EA	13.60	1,836.00
60/40 POZ	50.00	EA	9.60	480.00
C-41P	32.00	EA	3.20	102.40
Salt	748.00	EA	0.40	299.20
Gypsum	635.00	EA	0.60	381.00
FLA-322	77.00	EA	6.00	462.00
Gilsonite	675.00	EA	0.54	361.80
Super Flush II	500.00	EA	1.22	612.00
"Latch Down Plug & Baffle, 5 1/2"" (Blu	1.00	EA	320.00	320.00
"Auto Fill Float Shoe 5 1/2"" (Blue)"	1.00	EA	288.00	288.00
"Turbolizer, 5 1/2"" (Blue)"	10.00	EA	88.00	880.00
"Unit Mileage Chg (PU, cars one way)"	40.00	MI	3.40	136.00
Heavy Equipment Mileage	80.00	MI	5.60	448.00
"Proppant & Bulk Del. Chgs., per ton mil	340.00	EA	1.28	435.20
Depth Charge; 6001'-7000'	1.00	EA	2,592.00	2,592.00
Blending & Mixing Service Charge	185.00	BAG	1.12	207.20
High Head Charge (Over 6')	1.00	EA	240.00	240.00
Plug Container Util. Chg.	1.00	EA	200.00	200.00
"Service Supervisor, first 8 hrs on loc.	1.00	EA	140.00	140.00

PLEASE REMIT TO:	SEND OTHER CORRESPONDENCE TO:	SUB TOTAL	10,420.80
BASIC ENERGY SERVICES, LP	BASIC ENERGY SERVICES, LP	TAX	0.00
PO BOX 841903	PO BOX 10460	INVOICE TOTAL	10,420.80
DALLAS, TX 75284-1903	MIDLAND, TX 79702		



BASICSM
ENERGY SERVICES
PRESSURE PUMPING & WIRELINE

10244 NE Hwy. 61
P.O. Box 8613
Pratt, Kansas 67124
Phone 620-672-1201

FIELD SERVICE TICKET

1718 06231 A

DATE _____ TICKET NO. _____

DATE OF JOB: 5-23-12		DISTRICT: Pratt		NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/>		PROD <input type="checkbox"/> INJ <input type="checkbox"/> WDW <input type="checkbox"/>		CUSTOMER ORDER NO.:	
CUSTOMER: Edison Operating Co. LLC				LEASE: Cottrell				WELL NO.: 2-9	
ADDRESS:				COUNTY: Meade		STATE: KS			
CITY:				STATE:		SERVICE CREW: Orlando, Mitchell, Wright			
AUTHORIZED BY:				JOB TYPE: CNU - 5 1/2 L.S.					
EQUIPMENT#	HRS	EQUIPMENT#	HRS	EQUIPMENT#	HRS	TRUCK CALLED	DATE	AM	TIME
27283	1						5-23-12	PM	7:30
27463	1						5-23-12	AM	11:00
19960-1918	1							AM	8:00
								AM	9:00
								AM	10:00
						MILES FROM STATION TO WELL			40

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of Basic Energy Services LP.

SIGNED: Bob Kasper
(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM/PRICE REF. NO.	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
CP105-	AA2 Cement	SK	135		2295.00
CP103	60/40 p02	SK	50		600.00
CC105	C-41-P	Lb	32		128.00
CC111	Salt	Lb	748		374.00
CC113	bypsum	Lb	635		476.25
CC129	FLA-322	Lb	77		577.50
CC201	Gilsonite	Lb	675		420.00
CF600	Latch Down Plug & Baffle	ea	1		360.00
CF1251	AutoFill float shoe	ea	1		1100.00
CF1651	Turbolizers	ea	10		765.00
CL155	Superflush II	gal	500		170.00
F100	Pickup Mileage	mi	40		560.00
F101	Heavy Equipped Mileage	mi	80		544.00
E113	Bulk Delivery	TH	340		3240.00
CE207	Depth Charge 6000-7000'	ea	1		259.00
CE240	Blending & Mixing	SK	185		250.00
CE504	Plug Container	ea	1		175.00
S003	Service Supervisor	ea	1		300.00
CE503	High Head Charge	ea	1		

SUB TOTAL
2LS 10,420.80

CHEMICAL / ACID DATA:			

SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

SERVICE REPRESENTATIVE: Steve Orlando
THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: Bob Kasper
(WELL OWNER OPERATOR CONTRACTOR OR AGENT)

FIELD SERVICE ORDER NO.

QUALITY WELL SERVICE INC

324 SIMPSON
PRATT KS 67124

Invoice

Date	Invoice #
4/18/2012	461

Bill To
EDISON OPERATING
1223 N. ROCK RD, BLDG. 1-100
WICHITA, KS 67206

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
255	COMMON	13.50	3,442.50T
4	GEL	20.50	82.00T
9	CALCIUM	53.00	477.00T
63.75	FLO-SEAL	2.00	127.50T
268	HANDLING	2.10	562.80
8,925	.08 * SACKS * MILES	0.08	714.00
1	CONDUCTOR PIPE	750.00	750.00
35	PUMP TRUCK MILEAGE	8.00	280.00
412.9	DISCOUNT	-1.00	-412.90T
230.68	DISCOUNT	-1.00	-230.68
	DISCOUNT EXPIRES AFTER 30 DAYS FROM THE DATE OF THE INVOICE	0.00	0.00
	COTTRELL #2-9		
	Sales Tax MEADE	7.30%	271.28

Thank you for your business.	Total	\$6,063.50
------------------------------	--------------	------------

QUALITY WELL SERVICE, INC.

Federal Tax I.D. # 481187368

5400

Home Office 324 Simpson St., Pratt, KS 67124

Todd's Cell 620-388-5422

Office / Fax 620-672-3663

Rich's Cell 620-727-3409

Brady's Cell 620-727-6964

Date	4-16-12	Sec.	9	Twp.	33	Range	29	County	Meade	State	KS	On Location		Finish	3:00
Lease	Cottrell	Well No.	2-9			Location			Meade 9.5 miles West 7 miles South.						
Contractor															
Type Job	Conductor														
Hole Size	30" T.D. 108.														
Csg.	20" Depth 108														
Tbg. Size	Depth														
Tool	Depth														
Cement Left in Csg.	10" Shoe Joint														
Meas Line	Displace 34.9														
EQUIPMENT															
Pumptrk	No.	8 Dove													
Bulktrk	No.	5 Mike													
Bulktrk	No.	Mike													
Pickup	No.														
JOB SERVICES & REMARKS															
Rat Hole															
Mouse Hole															
Centralizers															
Baskets															
D/V or Port Collar															
Hooked up, mixed & poured.															
255sx Camman 2% Gel 3% CC															
1/4 C.F. down 20" csg Disposed															
with 34 bbls H2O.															
Cement did circulate to surface															
FLOAT EQUIPMENT															
Guide Shoe															
Centralizer															
Baskets															
AFU Inserts															
Float Shoe															
Latch Down															
Pumptrk Charge Conductor															
Mileage 35															
Tax															
Discount															
Total Charge															
Signature Bob Kasper															

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Thomas E. Wright, Commissioner
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

September 18, 2012

David Withrow
Edison Operating Company LLC
9427 E. Cross Creek
WICHITA, KS 67206

Re: ACO-1
API 15-119-21316-00-00
Cottrell 2-9
SW/4 Sec.09-33S-29W
Meade County, Kansas

Dear David Withrow:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 05/14/2012 and the ACO-1 was received on September 18, 2012 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department